



Gila County Division of Health & Emergency Management

Strategic Plan - 2016-2020

Created: March 11, 2016



Approved By: Michael J. O'Driscoll Date: July 1, 2016

Table of Contents

| | Page | | Page |
|--|---------------------------|--|---------------------------|
| Letter From the Director | <u>3</u> | Appendix | <u>20</u> |
| Executive Summary | <u>4</u> | Organizational Chart | <u>20</u> |
| Purpose and Practice of Public Health | <u>6</u> | 10 Essential Public Health Services | <u>21</u> |
| Overview of the Organization | <u>8</u> | 10 Essential Services Assessment | <u>22</u> |
| Mission, Vision and Core Values | <u>8</u> | Environmental Scan Summaries | <u>23</u> |
| Governance | <u>9</u> | Financial Analysis | <u>23</u> |
| Organizational Structure | <u>10</u> | Workforce Assessment | <u>24</u> |
| Organizational Assessment | <u>11</u> | Cultural Competency Assessment | <u>25</u> |
| Environmental Scan | <u>11</u> | Performance Management Self-Assessment | <u>26</u> |
| SWOT Analysis | <u>12</u> | Community Health Assessment | <u>27</u> |
| Strategic Plan Overview | <u>13</u> | | |
| Strategic Priorities | <u>14</u> | | |
| Gila County Community Health Improvement Plan | <u>14</u> | | |
| Performance Management and Quality Improvement | <u>15</u> | | |
| Workforce Development | <u>16</u> | | |
| Communication | <u>17</u> | | |

LETTER FROM THE DIRECTOR

Dear Gila County Division of Health and Emergency Management employees, Gila County Board of Supervisors, and members of the Board of Health,



I am pleased to share with you our five year strategic plan. The plan outlines what our organization plans to achieve, how we will do it, and how our progress will be measured. Included are our new mission, vision, and value statements defining the purpose, direction, and guiding principles of our organization. You will also find four (4) strategic priorities which have been selected because of their potential impact on improving the organization and supporting the community in an effort to improve health outcomes in Gila County.

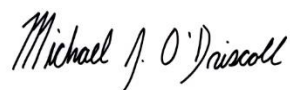
The strategic priorities lay the groundwork for reaching our goal to seek voluntary national accreditation from the Public Health Accreditation Board (PHAB).

The strategic plan is one tool we will use to improve public health services, value, and accountability to stakeholders. The plan provides guidance for decisions about future activities and resource allocation. With a changing environment, new opportunities, and emerging threats, there is a need to maintain flexibility and adapt to change, therefore, this plan is a working document.

I express my deepest appreciation to all employees who participated in the strategic planning process, for their valuable feedback and commitment to move the organization forward. I encourage staff and managers to support the strategic plan by integrating priorities into program work plans and individual employee performance plans. All staff have a part to play in ensuring the plan is implemented and that we are successful in improving community health, maintaining an effective public health system, developing a competent workforce, and building a culture of quality.

This document is one part of a comprehensive effort to advance quality and performance within the Gila County Division of Health & Emergency Management and fulfill our mission to advocate, educate, improve and monitor the public health and safety for Gila County residents and their environment.

Sincerely,



Michael O'Driscoll, MPH
Director, Gila County Division of Health & Emergency Management

EXECUTIVE SUMMARY

In 2015, Gila County Division of Health and Emergency Management (GCDHEM) began a strategic planning process. The results of which have led to a better understanding of where the organization is today, its purpose, and a shared vision for the future.

The 2016-2020 Strategic Plan sets forth what our organization plans to achieve in the next five years along with a roadmap for achieving it. It provides a valuable guide for all employees and stakeholders to make decisions that will move the organization forward.

In this strategic plan you will find:

- Description of the Organization (governance and organizational structure)
- Mission, Vision, and Values
- Environmental Scan (internal and external factors that may impact community health, employees, and/or the organization)
- Assessment of Strengths and Weaknesses
- Strategic Priorities
- Goals and Objectives
- Links to the Gila County Community Health Improvement and Arizona State Health Improvement Plans
- Strategic Planning Methods
- 10 Essential Public Health Services

The strategic plan focuses on the entire organization and is not intended to be a stand-alone document. It purposefully aligns with other important assessment, planning, and evaluation work such as the community health assessment, community health improvement plan, state-wide health improvement plan, quality improvement plan, workforce development plan, and other operational work plans.

Through the strategic planning process GCDHEM adopted new mission, vision, and core value statements to better reflect the purpose, direction, and guiding principles of the Division. They will be displayed prominently throughout the Division and used regularly in communication with our employees and the public.

GCDHEM actively worked to better understand internal and external factors that affect the organization and how it operates. This document provides a financial analysis: SWOT analysis and the results of several recent assessments and surveys (i.e., public health workforce assessment, linguistic and cultural competency assessment, performance management self-assessment, focus groups, key informant survey, and community health assessment). Based on these assessments, Division and community strengths were identified as well as areas for improvement.

The four (4) strategic priorities included in this plan are:

Gila County Community Health Improvement Plan (CHIP): Coordinate divisional activities to implement strategic priorities outlined in the CHIP.

Performance Management & Quality Improvement Culture: Implement a performance management system and build capacity for doing quality improvement work to increase effectiveness and efficiency of programs.

Workforce Development: Assure a competent public health workforce by creating a culture in which employees feel valued and appreciated, staff receive training on public health core competencies, and managers are provided with opportunities to develop and improve skills.

Communication: Improve internal communication and use effective techniques to communicate with community partners and the public.

Several of these priorities are interconnected and mutually supportive. They represent a comprehensive approach to align organizational improvement and community support.

Over the course of the next five years, this plan may be revised and updated as needed to account for a changing environment, new opportunities, and emerging threats. GCDHEM's performance management system will provide ongoing monitoring of progress toward goals and objectives identified in this plan and will identify areas for improvement. An annual report will document and communicate progress to employees and other stakeholders.

This strategic plan is a critical piece toward helping the organization and employees fulfill their purpose to promote and protect the health and well-being of Gila County residents and their environment. It provides direction to achieve GCDHEM's vision of health, safety, and well-being for all Gila County residents.

PURPOSE AND PRACTICE OF PUBLIC HEALTH

The Purpose of Public Health

The fundamental obligation of a public health department, which is responsible for population-based health is to:

- Prevent epidemics and the spread of disease
- Protect against environmental hazards
- Prevent injuries
- Promote and encourage healthy behaviors and mental health
- Respond to disasters and assist communities in recovery
- Assure the quality and accessibility of health services

These responsibilities define the function of public health and assure the quality health services provided by our health department. The role of public health is to assure the conditions necessary for people to live healthy lives, through community-wide prevention and protection programs.

Core Public Health Functions

- Assessment
- Policy Development
- Assurance

The Practice of Public Health

Public health serves communities and individuals by providing a variety of essential services. Typically, the public only becomes aware of the need for public health services when a problem develops (e.g., an epidemic occurs). The practice of public health exists in the ten essential services, which describe the public health activities that all communities should undertake and serve as the framework for the National Public Health Performance Standards (NPHPS) instruments and are outlined in more detail on [page 26](#) of the appendix.

STRATEGIC PLANNING MODEL / METHODOLOGY

Strategic Planning Committee Members

Michael O'Driscoll, Director, GCDHEM
Paula Horn, Deputy Director, GCDHEM
Ginnie Scales, Manager, Health Services
Nancy Rutherford, Manager, Health Programs
Josh Beck, Manager, Emergency Management/PHEP
John Castaneda, Manager, Animal Control
Samantha Jerome, Manager, WIC

Strategic Planning Facilitators

Paula Horn, Deputy Director, GCDHEM
Celena Cates, Executive Administrative Assistant, GCDHEM

Strategic Planning Meetings

| | |
|------------------------------|----------------------------|
| Thursday, March 5, 2015 | Tuesday, December 15, 2015 |
| Friday, March 6, 2015 | Tuesday, January 27, 2016 |
| Wednesday, June 3, 2015 | Thursday, March 10, 2016 |
| Wednesday, July 29, 2015 | Friday, March 11, 2016 |
| Wednesday, September 2, 2015 | |

Components of the Strategic Planning Process

NACCHO Operational Definition Self-Assessment Tool, May, 2015
Workforce Needs Assessment, October – September, 2015
Work Environment Survey, January 2016
Strengths, Weaknesses, Opportunities, Threats (SWOT) Analysis, March, 2016
Development of Goals and Objectives, March – April, 2016

OVERVIEW OF THE ORGANIZATION

The Gila County Division of Health & Emergency Management operate a number of programs with 45 staff members to address community health issues county-wide. In total, there are 26 programs within the Division that are dedicated to improving community health, through health education, direct service, emergency preparedness, and disease control and analysis. Gila County Public Health Department has two locations that provide direct services to the residents. Gila County has an annual budget of over three million dollars and is comprised of federal, state, local and interagency funding. The grant funding sources have specific goals and objectives which do not allow for the flexibility to handle all the community health needs.

A detailed description of Gila County's geography, demographics, social and economic characteristics, and special populations is available in the Gila County Community Health Assessment (CHA). To review or download a copy the CHA, please visit GCDHEM's webpage at the Gila County website: http://www.gilacountyaz.gov/government/health_and_emergency_services/index.php

MISSION

The Gila County Division of Health & Emergency Management strives to advocate, educate, improve and monitor the public health and safety in Gila County, by providing the highest level of quality, integrity, and respect to those we serve.

VISION

To sustain a culture of excellence that promotes health, safety, and well-being for all Gila County residents.

CORE VALUES

Excellence: We believe in continuous improvement, striving for excellence, and a commitment to improving community health.

Integrity: We strive to be honest, trustworthy and transparent in all we do.

Respect: We treat all people with respect, courtesy, and understanding.

Collaboration: We develop positive relationships, foster innovative solutions, and strengthen our capacity to accomplish our mission.

Service: We commit to a work environment characterized by consistency, honesty, and innovative approaches to serve members of the community.



GOVERNANCE

The Gila County Board of Health was established and organized according to Arizona State Statute Title 36, Articles 36-183 and 36-184. In Gila County, the Board of Supervisors appoints a health officer to oversee the Board of Health and approves the annual budget. The Board of Health is comprised of three community members, one from each district, one medical doctor, and one Board of Supervisor member.

Board of Health members include;

1. Denise Hansen; District 2 (resides in Globe)
scottanddenise@cablone.net
(928) 425-2710
2. John Wisner; District 3 (resides in Star Valley)
jwisner@hellsgatefire.org
(928) 978-9321
3. Linda Scoville, Principle, Julia Randall Elementary School; District 1 (resides in Pine/Strawberry)
Lindascoville13@gmail.com
lindascoville@pusd.com
(480) 330-3325
4. Lance Porter, MD, Banner Payson Medical Center
Lance.Porter@bannerhealth.com
(928) 472-1251
5. Michael Pastor, Supervisor, District 2, Chairman, Board of Supervisors
mpastor@gilacountyaz.gov
(928) 402-8753

Board of Supervisors include;

1. Tommie Martin; District 1
Gila County Complex, Payson AZ
(928) 474-0802
2. Michael Pastor, District, 2, Chairman
Gila County Courthouse, Globe
(928) 402-8753
3. John Marcanti, District 3
Gila County Courthouse, Globe
(928) 402-8726

ORGANIZATIONAL STRUCTURE

GCDHEM is organized into six departments and administrative services (see [organizational chart](#) on in the appendix). Each department has a vital role in carrying out the ten essential public health services (see [10 Essential Services](#) in the appendix).

Director:

The Director maintains responsibility for the overall direction of the administrative, clinical, and environmental functions of the health department. The Director currently supervises one of the six departments; Environmental Health and provides direct supervision to the Deputy Director and Emergency Management/Public Health Emergency Preparedness manager.

Administrative Services:

Administrative Services includes: Accounting, budgeting, purchasing/receiving, birth/death certificates, and administrative support throughout the division.

Health Services:

Health Services includes communicable disease control and prevention which is accomplished through services, which include: HIV services, Immunizations, Tuberculosis, and Sexually Transmitted Disease services. We also provide Family Planning, Well Baby, and WIC services.

Health Programs (Prevention) Services:

Health Program services works with community partners to plan and implement public health education, develop policies that reduce morbidity and mortality, and support healthy environments.

Emergency Management/Public Health Emergency Preparedness (EM/PHEP):

The EM/PHEP Department were strategically combined to detect and respond to natural or intentional health and/or disease incidents for improving public health emergency preparedness and to detect and respond to all natural or intentional disasters/emergencies for community-wide emergency preparedness.

Environmental Health (EH):

The EH Department aids in the elimination of all environmental factors that lead to disease, lessen quality of life, and degrade the physical environment in Gila County. Additionally, EH staff evaluate the status of and oversee the compliance of health, safety, and environmental standards, codes, regulations, and county programs through inspections, audits, and monitoring.

Animal Control:

The Animal Control Department provides: Rabies/animal control, enforcement, protection, education, adoption services, and low cost spay and neuter services to Gila County domesticated animals. This allows them to live in a community that promotes responsible pet ownership and is protected from diseased and aggressive domestic animals.

ORGANIZATIONAL ASSESSMENT

In March 2015, GCDHEM conducted an accreditation readiness assessment using the Local Health Department Self-Assessment Tool, Operational Definition of a Functional Local Health Department Capacity Assessment for Accreditation Preparation provided by the National Association of County and City Health Officials (NACCHO). This tool allows local health departments to measure themselves against the Operational Definition of a functional local health department and subsequently identify areas of strength and areas for improvement. Focus areas and indicators in the tool are aligned with the 10 Essential Public Health Services. These services provide consistent standards regarding how local health departments should fulfill their fundamental responsibility of keeping people healthy.

Scoring is based upon the following:

- No capacity: There is no capacity, planning, staff, resources, activities, or documentation to fulfill the indicator.
- Minimal capacity: There is minimal planning and staffing capacity to fulfill the indicator but no implementation activity or documentation.
- Moderate capacity: There is moderate planning, staffing and other resources to fulfill the indicator but only minimal activity and/or documentation.
- Significant capacity: There is significant planning, staffing, and other resources and a moderate amount of activity and/or documentation.
- Optimal capacity: There is significant planning, staffing and resources and significant to optimal activity and/or documentation to fulfill the indicator.

The results of this assessment allowed GCDHEM to identify internal strengths and weaknesses and are provided on [page 22](#) in the appendix.

Environmental Scan

As part of the strategic planning process, our organization conducted an environmental scan to identify, summarize, and evaluate existing data that was useful to enlighten the content of the strategic plan. The following reports were reviewed by GCDHEM Leadership Team: financial analysis, public health workforce assessment, work environment assessment, performance management self-assessment, and the linguistic and cultural competency assessment.

GCDHEM conducted a community health assessment to obtain information from focus groups, key informant interviews and a health assessment survey distributed county-wide. The environmental scan summaries and findings can be found on [pages 23-27](#) in the appendix. The GCDHEM Leadership Team determined the information from the community health assessment provided sufficient information for our environmental scan.

SWOT Analysis

GCDHEM conducted a SWOT analysis to determine internal strengths and weaknesses, and opportunities, threats and challenges for the division. The SWOT analysis tool will help GCDHEM build on strengths, minimize weakness, seize opportunities, and counteract threats.

The SWOT analysis is part of GCDHEM's strategic planning process where it connects its goals, objectives and strategies to actionable tactics carried out by employees. The SWOT analysis was one part of the GCDHEM strategic planning process.

Strengths identified by GCDHEM included knowledge and efficient use of resources, skilled public health professionals, availability of services in Northern and Southern Gila County, evidence-based practices, good customer service, and community education/outreach.

Weaknesses identified by GCDHEM included effective internal communication, coordination across programs, retention of qualified staff, BOS/stakeholder engagement, which includes building knowledge/use of social media and provision of information relevant to program updates, community involvement, and accreditation.

Opportunities identified by GCDHEM included utilization of social media outlets to improve external communication, public health policy, community education/outreach, partnership development/engagement, utilization of governing authorities (e.g., BOH, BOS), funding, and professional development.

Threats identified by GCDHEM included overlapping of services provided to the community, lack of funding/loss of block grants, turnover rate due to retirement or retention, professional development of our workforce, and dissatisfied customers.

| Strengths | Weakness |
|--|---|
| <ul style="list-style-type: none">• Knowledge and efficient use of resources• Skilled public health professionals• Availability/location of services• Utilization of evidence-based practices• Customer service• Community education/outreach | <ul style="list-style-type: none">• Internal communication• Coordination across programs• Retention of qualified staff• Stakeholder engagement includes: Knowledge/use of social media and involvement in Board of Supervisors work sessions to inform them of program updates, community involvement and accreditation. |
| Opportunities | Threats |
| <ul style="list-style-type: none">• Utilization of social media outlets to improve communication• Public Health policy development• Community education/outreach• Partnership development/engagement• Utilization of governing authorities (Board of Health, Board of Supervisors).• Funding• Professional development | <ul style="list-style-type: none">• Overlapping of services provided to the community• Lack of funding/loss of block grants• Potential for pandemic• Federal, state and local policies.• Turnover rate (e.g., retirement, retention)• Professional development of our workforce• Dissatisfied customers |

STRATEGIC PLAN OVERVIEW

The 2016-2020 Strategic Plan establishes what GCDHEM plans to achieve in the next five years, how it will achieve it, and how our organization will monitor our achievements. The strategic plan provides a guide for making decisions on allocating resources and on taking action to pursue strategies and priorities. The plan was developed through a strategic planning process.

The strategic plan outlines the future direction of GCDHEM. It provides a common understanding of mission, vision, values, goals, and objectives. This document can be used as a template for all employees and stakeholders to make informed decisions that move the organization forward. This plan explains how the organization will be different in five years and how the change will be measured. The plan will be reviewed at least annually and objectives may be revised as needed. The plan will be renewed every three-five years.

This plan focuses on the entire Division and is not a stand-alone document. It aligns with other important assessments, planning, and evaluation work such as: Gila County's Community Health Assessment and Community Health Improvement Plan, Arizona's State Health Improvement Plan, GCDHEM's Quality Improvement, Workforce Development and Performance Management Plans, and department program goals/objectives work plans.



STRATEGIC PRIORITIES

These priority goals are listed below with objectives that will be used to guide the GCDHEM operations in 2016 through 2020.

- **Gila County Community Health Improvement Plan:** Align with and support the Gila County and Cobre Valley Regional Medical Center Community Health Improvement Plan (CHIP).
- **Performance Management & Quality Improvement Culture:** Implement Performance Management & Quality Improvement Plans.
- **Workforce Development:** Assure a competent public health workforce.
- **Communication:** Improve communication methods and tools.

Strategic Priority #1: Align with and support the Gila County and Cobre Valley Regional Medical Center Community Health Improvement Plan (CHIP)

In 2015, GCDHEM partnered with CVRMC in a community health improvement process to identify Gila County's health improvement priorities, mobilize community partners to address the priorities, and prepare a CHIP. In January 2016, an advisory committee was formed from a variety of community partners county-wide to discuss the health priorities identified in the Gila County and CVRMC Service Region Community Health Needs Assessment. The top health priorities selected by the committee are: 1) Obesity, 2) Substance Abuse, 3) Access to Healthcare, including Mental Health Services, and 4) Sexual Health.

To review the CHIP please click on the link below:

http://www.gilacountyaz.gov/government/health_and_emergency_services/index.php

Goal 1: Ensure successful implementation of the CHIP

Objectives (GCDHEM):

1. Form action groups from advisory committee members and other community partners to develop action plans for each priority area that include details on how to improve health in Gila County.
2. GCDHEM staff will regularly participate in CHIP action group meetings and will serve in leadership roles when necessary and appropriate.
3. GCDHEM staff will coordinate grant applications, provide updated data, and assist with any identified assessment needs for CHIP action groups.
4. GCDHEM staff will promote activities and messages that support the four CHIP priorities, through news media, social media, and other methods of communication.
5. All GCDHEM staff will submit program goals/objectives to support the CHIP by May 1st annually to the Director.

Objectives (EM/PHEP)

1. Improve access to health care during a disaster or public health emergency through quarterly meetings with our Central Region Arizona Coalition for Health and Emergency Response partners.

Objectives (WIC):

1. WIC will increase referrals to Gila County Healthcare providers within six months.
2. Nutrition education will be provided to all clients to treat and prevent obesity and its related illnesses.
3. Increase education on the importance of fruit and vegetable intake by providing access to fresh and local produce via the Farmers Market Nutrition Program.
4. Improve proficiency in the new Health and Nutrition Delivery System (HANDS) to allow for smooth transition to EBT benefits by FFY18.

Objectives (Health Services):

1. Annually, by June 30, Nurses will evaluate progress toward reducing the rates of sexually transmitted diseases.

Objectives (Prevention):

1. Annually, by June 30, Prevention staff will facilitate evidenced-based Parent and Adolescent Sexual Health Communication community-based classes.
2. Annually, by May 30, Prevention staff will facilitate age appropriate evidenced-based reproductive health literacy classes in coordination with school districts.

Goal 2: Document and communicate CHIP progress and achievements

Objectives (GCDHEM):

1. Develop a reporting tool/system for documenting and collecting progress toward the CHIP short and long-term objectives and other successes annually, beginning July 1, 2017.
2. Prepare annual CHIP progress report by January 31 annually through 2020.
3. Communicate annual CHIP progress to public health partners and the community through at least two avenues by February 28th annually through 2020.

Strategic Priority #2: Implement Performance Management & Quality Improvement Plans

The relationship between quality improvement (QI) and performance management is mutually reinforcing. Performance management is cyclical process of measuring, monitoring, and reporting of progress toward strategic division, department, and program goals and objectives. Performance management is key to building a culture of quality at GCDHEM. QI is a critical piece of performance management as it provides a structured, data-driven approach for identifying and prioritizing necessary QI projects based on performance data. QI is defined as an integrative process that links knowledge, structures, processes and outcomes to enhance quality throughout an organization

(PHAB, 2009).

Goal 1: Monitor and maintain adherence to the Performance Management and Quality Improvement Plans

Objectives (GCDHEM):

1. Conduct annual department/program performance assessment to determine if there is a need for quality improvement projects.
2. Quarterly review/progress reports of performance management goals and objectives.
3. Quarterly review/progress reports of quality improvement goals and objectives.

Objectives (WIC):

1. Conduct a client satisfaction survey for WIC families annually and review improvement measures based upon responses.
2. WIC will perform a local agency self-assessment twice a year to make sure the program is meeting standards for excellence, compliance, best practices, and efficiency.

Objectives (Animal Control):

1. Review animal license report
2. Altered vs Unaltered License Report

Strategic Priority #3: Assure a competent public health workforce

Training and development of the workforce is one part of a comprehensive quality improvement strategy. Essential to this work is to identify gaps in knowledge, skills, and abilities by assessing organizational and individual competencies. It is important to address any identified gaps through targeted training and development opportunities.

The SWOT analysis identified gaps that are directly related to workforce development. First, employees want to feel valued and recognized. Formal employee recognition efforts can be enhanced. Organizations with valued employees have higher retention rates and are in a better position to address succession planning. GCDHEM employees recognize a need to improve knowledge, skills, and abilities to better serve the community. Staff would like to continue to receive training, not only in the areas that are required for their field of expertise, but by broadening their knowledge through training in public health and emergency preparedness core competencies, and through opportunities to work on projects that involve other departments, programs, and staff in a variety of capabilities. Additionally, managers expressed a need for management/leadership, communication, and other training opportunities to develop and improve managerial skills.

A five-year Workforce Development Plan, which includes goals and objectives, has been developed and implemented to ensure the plan is fulfilled.

Goal 1: Monitor and maintain adherence to the Workforce Development Plan

Objectives (GCDHEM):

1. GCDHEM Leadership Team will provide monthly status updates of workforce development goals/objectives in their Leadership Team meetings and conduct annual performance evaluations of staff.
2. Continual assessment of staff training matrix to ensure compliance with workforce development plan.
3. At least 85% of employees will have completed mandatory and program specific required trainings annually, by December 31.
4. 100% of required licensures and certifications will be current.
5. Develop and implement a public health core competency curriculum and certificate program by December 31, 2016.
6. Develop and implement individual training plans for each employee in conjunction with annual performance evaluations by December 31, 2016.
7. Review and update the workforce development plan annually.

Goal 2: Develop and improve GCDHEM managers

Objectives (GCDHEM):

1. Develop an orientation packet for new employees to be implemented throughout the Division by June 30, 2016.
2. Provide curricula for communication and leadership training that current managers are required to attend annually, by December 31.

Strategic Priority #4: Improve communication methods and tools

Communication is key to success in any organization. Effective communication enables all levels of the organization to understand expectations, concerns, policies, and other issues before they become an obstacle. The flow of information from the top down and bottom up are both essential for the agency to thrive. The SWOT analysis shows that employees feel the primary weakness of the Division is internal communication. Other perceived weaknesses include lack of coordination across programs/departments, lack of clear direction, lack of leadership, and management training. Many of these weaknesses stem from and/or could be improved through better communication.

The Director and Leadership Team will foster communication through semi-annual All-Hands staff meetings and leadership retreats, where new policies, standards, and operating procedures will be shared as well as goals and direction for the future. Leadership will strive to improve daily, weekly, and monthly communication by identifying both barriers to communication and examples of effective communication.

GCDHEM will strive to communicate effectively with clients, the community, and public health partners. The Division will focus on improving the website and developing a social media strategy. Social media provides an opportunity for the Division to interact with customers, stakeholders, and partners in new and innovative ways.

Goal 1: To improve utilization of innovative communication platforms

Objectives (GCDHEM):

1. To develop an approval process and engage staff in submitting educational materials and public health information to the community.
2. To develop, implement, and maintain community partnerships through traditional and web-based communication, such as social media platforms.

Objectives (EM/PHEP)

1. Implement an annual media campaign for public health preparedness month (September) utilizing current trends in social media platforms.
2. Utilize GCDHEM social media platforms to improve communication to at risk and hard to reach populations through documented and continuous use for release of alerts and press releases.

Objectives (WIC):

1. Continuously update client files to utilize appointment reminders to improve and maintain caseload.
2. Utilize local communication resources to improve community knowledge of WIC and nutrition related programs.

Objectives (Health Services):

1. Implement and utilize Gila County website to publish monthly immunization calendars.
2. Implement a media campaign to promote health services in Gila County.
3. Continuously update client demographics to improve communication of immunization reminders and recalls.

Objectives (Animal Control):

1. Implement and utilize Chameleon Mailbox to update animal/activity information.
2. Utilizing the GCDHEM Facebook page to promote adoptable animals and community events.

Goal 2: To improve internal communication

Objectives (GCDHEM):

1. GCDHEM will assess a variety of new tools to communicate with employees (may include video updates, newsletter, etc.) by January 31, 2017. Employees will receive an update via a

new communication tool by July 1, 2017.

2. GCDHEM departments will hold monthly staff meetings.
3. GCDHEM will hold semi-annual staff meetings.

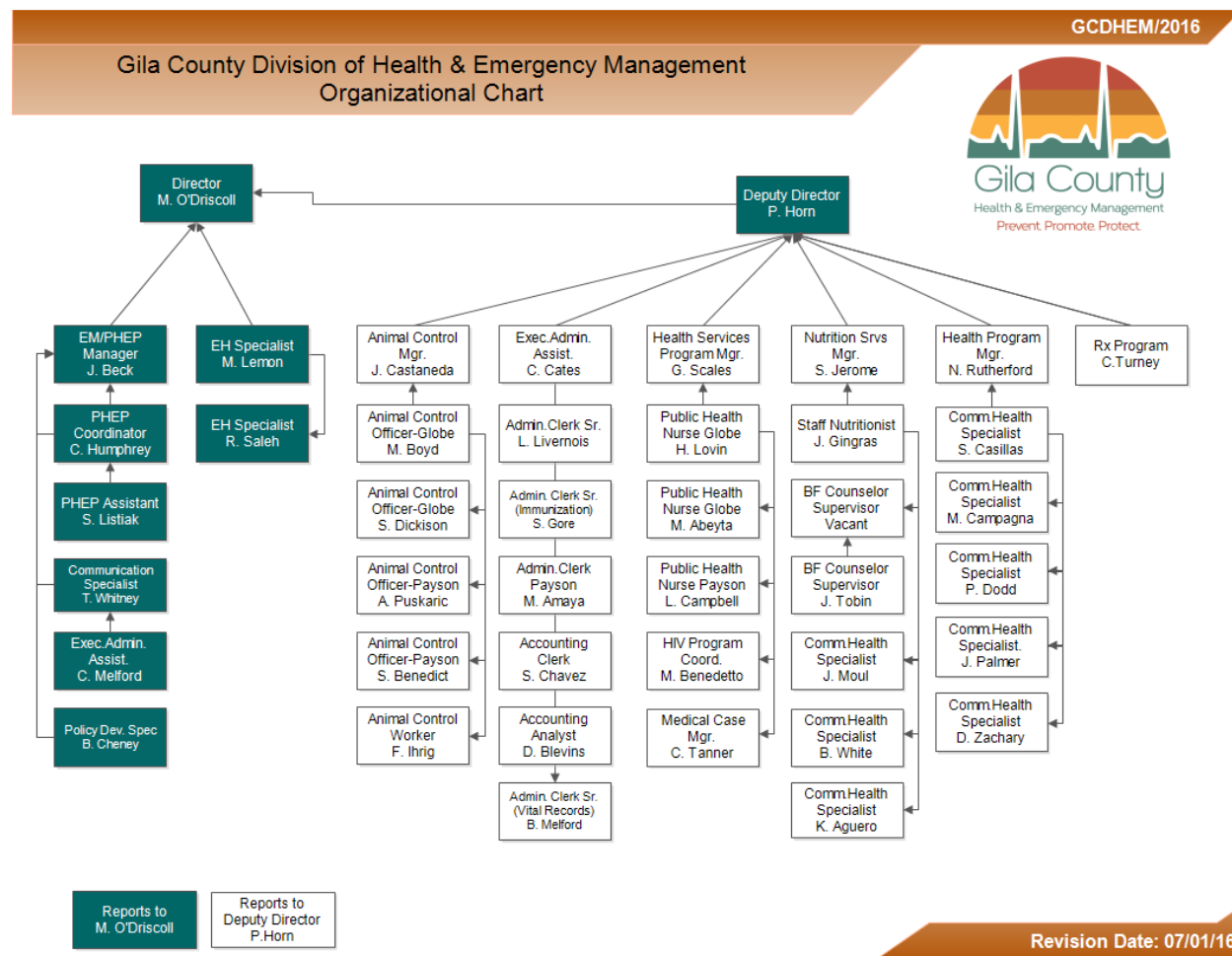
Additional Areas of Improvement

Additional areas of improvement for GCDHEM include:

- Develop and execute a plan to successfully maintain accreditation while accomplishing the necessary steps to achieve National Accreditation with the Public Health Accreditation Board (PHAB).
- Public Health Emergency Preparedness training and development integrated throughout the organization.

Appendix

Organizational Chart



Ten Essential Public Health Services¹

1. Monitor health status to identify and solve community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships and action to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure competent public and personal health care workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.



¹ Ten Essential Public Health Services: <http://www.cdc.gov/nphsp/essentialservices.html>

10 Essential Services (Accreditation Readiness) Assessment

GCDHEM Leadership Team completed this self-assessment in March, 2015. Throughout the assessment, there were multiple indicators that represent similar topics listed under

several for the essential services and standards.

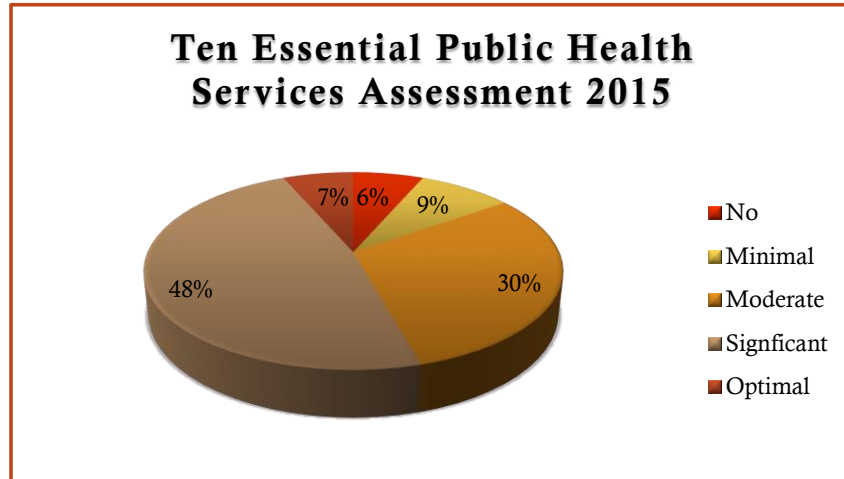
The results of this assessment indicates our health department maintains moderate to significant capacity within these public health services.

Areas of strength included: Data collection, sharing, and reporting, disease

investigation, health promotion activities, program evaluation and improvement, evidence-based practices, linkage to care, and partnership development.

Areas of weakness included: Development of future workforce, minimal knowledge of public health laws, communicating enforcement violations to other agencies, and analysis of regulatory compliance patterns. Weaknesses were noted primarily around areas where insufficient staffing existed in key areas within the Division.

Finally, it has been determined that health disparities need to be better addressed throughout the Division, as programs and services are developed and implemented. Quality improvement and management strategies need to be implemented.

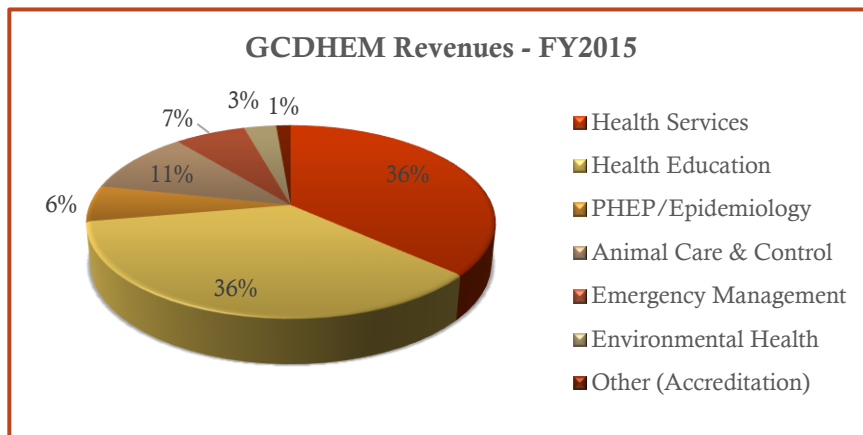


Environmental Scan Summaries

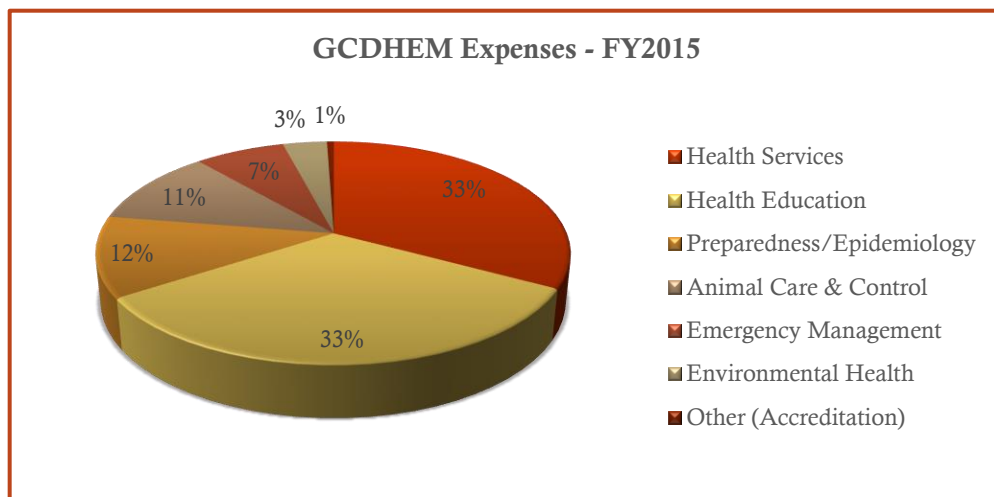
This section summarizes existing data that was useful to inform the development of the strategic plan. Included is a financial analysis, SWOT analysis, and the results of several recent assessments and surveys (workforce assessment, linguistic and cultural competency assessment, performance management self-assessment, and community health assessment). This information helps to create a big-picture view of what is going on inside and outside the organization. The data and information provides understanding about the historical perspective of the organization, current context, and future outlook.

Financial Analysis

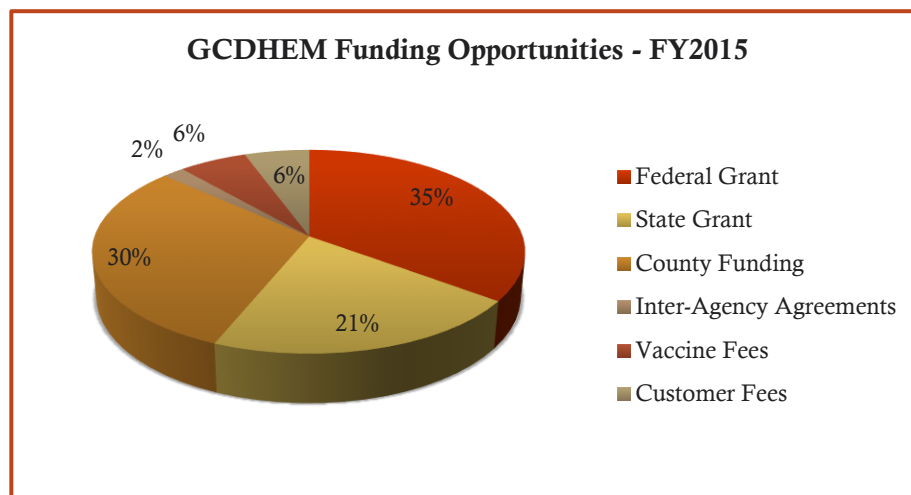
GCDHEM's annual financial report conforms to all current and relevant pronouncements referred to as Generally Accepted Accounting Principles (GAAP).



For 2015, the Division revenues/expenses included: Health Services and Education, Emergency Preparedness, Epidemiology, Animal Control, Emergency Management, Environmental Health, and Accreditation.



In 2015, the funding opportunities provided to GCDHEM included: Federal and State grants, general funding from Gila County, Inter-Agency agreements, vaccination fees, and client services.



Workforce Assessment

In September, 2015, a workforce assessment was conducted in partnership with the University of Arizona. A final report was provided to GCDHEM in October, 2015. This assessment utilized the Council of Linkages Core Competencies for Public Health Professionals, which are a set of nationally recognized standards upon which the workforce development plan would be built. The core competencies are organized into eight domains, which reflect areas within public health, and three tiers, which represent career stages for public health professionals.

The eight domains include:

- Domain #1: Analytical/Assessment Skills
- Domain #2: Policy Development/Program Planning Skills
- Domain #3: Communication Skills
- Domain #4: Cultural Competency Skills
- Domain #5: Community Dimensions of Practice Skills
- Domain #6: Public Health Sciences Skills
- Domain #7: Financial Planning and Management Skills
- Domain #8: Leadership and Systems Thinking Skills

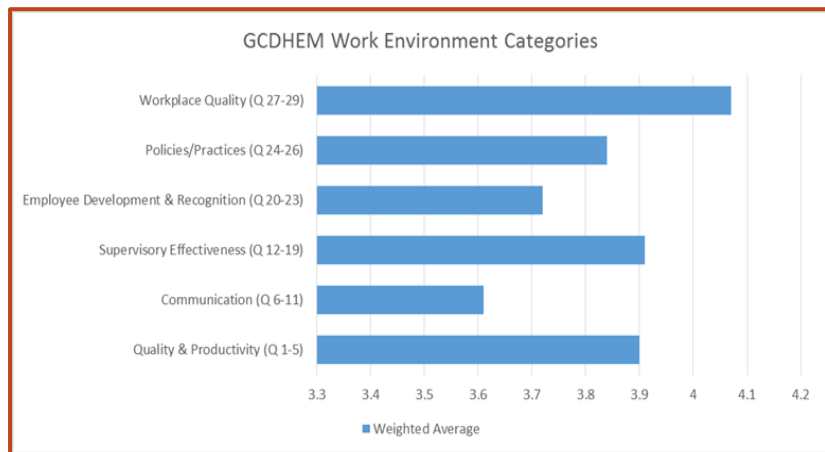
Additionally, the assessment identified a need for all staff to be trained in Public Health Emergency Preparedness (PHEP) and Response Core Competencies.

The four domains include:

- Domain #1: Model Leadership
- Domain #2: Communicate and Manage Information
- Domain #3: Plan for and Improve Practice
- Domain #4: Protect Worker Health and Safety

In January, 2016, a work environment assessment was conducted to assess the Leadership Team's supervisory effectiveness, quality and productivity, work environment, policies and practices, employee development, and communication.

The findings presented from both assessments were utilized by GCDHEM Leadership Team and Workforce Development Committee to design and develop a division-wide workforce development plan which includes individual and departmental training plans.



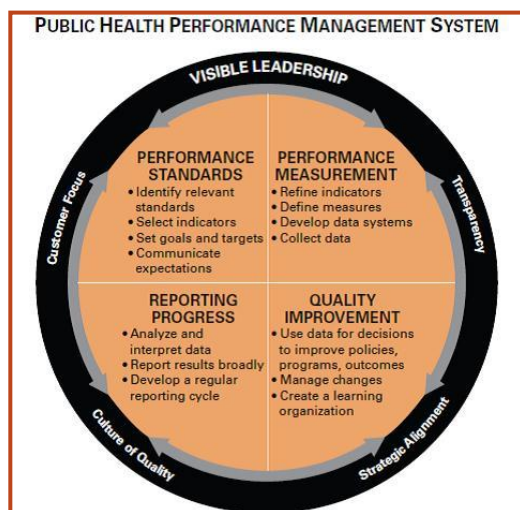
Linguistic & Cultural Competency Assessment

The purpose of Cultural Competence and Linguistic Competence Policy Assessment (CLCPA) is to support local health departments in the following areas: improve health care access and utilization, enhance the quality of services within culturally diverse and underserved communities, and promote cultural and linguistic competence as essential approaches in the elimination of health disparities.

In December 2015, the CLCPA was completed by the Leadership Team. Social, cultural, ethnic, and special-needs groups served by GCDHEM include: Children, adolescents, adults, older adults, Hispanic/Latino, Caucasian, African-American, American Indian/Alaska Native, Asian American, hearing impaired, and others. Based upon the number of full-time employees in July 2015, 78% percent of our employees have direct contact with clients on a daily basis. Two employees can speak, read/write or understand Spanish. The CLCPA is available upon request.

Performance Management Self-Assessment

In March 2015, GCDHEM Leadership Team used the Public Health Performance Management Self-Assessment tool to identify the extent to which the components of a performance management system are in place. According to the Public Health Foundation (PHF), this tool is organized around five components (framework at left).²



- Visible Leadership
- Performance Standards
- Performance Measurement
- Reporting Progress
- Quality Improvement

In July 2015, analysis of this assessment was completed by GCDHEM's Performance Management Committee (PMC). Performance improvement areas identified by the committee were:

- Adapt a culture throughout the Division to focus on performance management and quality improvement.
- Train all staff to use quality improvement tools, performance standards and measures, and methods of reporting.
- Personnel and financial resources dedicated to performance and quality improvement.
- Develop quality and performance improvement action plans that measure performance (e.g., timelines, actions, and responsible parties).

In September 2015, the PMC in conjunction with GCDHEM's Leadership Team developed and implemented a Performance Management Plan (PMP). Performance areas to be measured included:

- Client Satisfaction (Customer Service)
- Client Access
- Program Utilization
- Health Outcomes
- System Performance

² Performance Management Self-Assessment Tool:

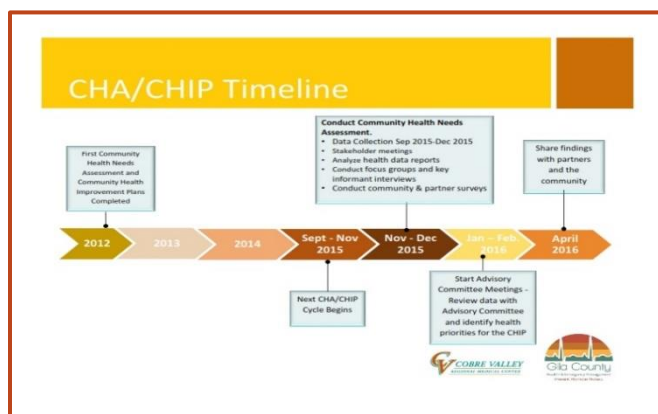
http://www.phf.org/focusareas/performancemanagement/toolkit/Pages/PM_Toolkit_Self_Assessment.aspx

Community Health Assessment

In 2011, the Public Health Accreditation Board (PHAB), in partnership with key public health organizations, launched a new national voluntary accreditation program for state, tribal, local, and territorial health departments. The standards and measures encompass 12 domains of performance and include a comprehensive community health assessment (Domain 1, Standard 1.1) and a community health improvement plan (Domain 5, Standard 5.2). A documented community health assessment and improvement plan are two of the three prerequisites for applying to PHAB. PHAB requires that these processes be conducted collaboratively and that the documents be dated within the last five years.³

In 2015, GCDHEM partnered with CVRMC to conduct a Community Health Assessment in Gila County.

This collaborative effort provided shared ownership to improve community health and identify health outcomes, while exploring population demographics, social and economic realities, and capturing community and partner input throughout Gila County.



The information in the community health assessment is used to educate and mobilize Gila County residents, develop priorities, advocate for resources, and plan actions to improve the health of the county. A copy of the assessment is available online at the Gila County website. Please click the link below to review or download the assessment.

http://www.gilacountyaz.gov/government/health_and_emergency_services/index.php

³ Drivers of Health Assessment and Improvement Planning:

<http://www.cdc.gov/stltpublichealth/cha/drivers.html>